DEPARTMENT OF HOMELAND SECURITY

UNITED STATES CUSTOMS AND BORDER PROTECTION PROCESS RECEIPT AND RETURN

Plaintiff: UNITED STATES OF AMERICA	Court Case Number:	Court Case Number: 04-CR-544 Type of Process: Forfeiture - Service		
Defendant: KUN FUK CHENG	Type of Process: For			
SERVE AT: (Name of Individual, Company, Corporation, etc. to to Nian Fa Lin, 52 Lent Street, Poughkee		Seize: (Address: street or RFD, Apt. 1	No., City,State and Zip Code):	
Send notice or service copy to requester at Name and Address below:		Number of Processes	to be Served	
GLENN T. SUDDABY, United States Attorney, NDNY				
218 James T. Foley Courthouse 445 Broadway		Number of Parties to So	Number of Parties to Served	
Albany, New York 12207		Check box if service is o	Check box if service is on USA	
Signature of Attorney or other Originator requesting service on behalf Thomas A. Capezz Signature and Date of Person accepting Process:	() Defendant	Telephone No. 518-431-0247	Date 2/14/04	
SPACE BELOW FOR USE OF DE	PARTMENT OF HO	MELAND SECURIT	Y AGENCY	
1 acknowledge receipt for the total number of process indicated. District of Origin No District to Set No	Agency Diffic	A Andew	Date 2.16.20	
I HEREBY CERTIFY AND RETURN THAT I() PERSONALLY SERVE THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, COR	ED. X) HAVE LEGAL EVIDENCE OF RPORATION, ETC., AT THE ADDRESS	F SERVICE. () HAVY EXECUTED S SHOWN ABOVE OR ON THE AI	ACCHOUNT IN OPEN A PAGE	
() I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LO				
Name and Title of individual served if not shown above. () A person	of suitable age and discretion then resid	ling in the defendant's usual place of		
4.11			abode.	
Address: (complete only if different than shown above)	Date of Service	Time of Service () a.m. () p.m.	abode.	
Address: (complete only if different than shown above)			FP&FO, C	

Service was completed on 3.8.2006 as evidenced by the attached copy of the Return Receipt (Certified Mail).

SENDER: COMPLETE THIS S	ECTION	COMPLETE THIS SECTION ON DEL	IVERY
Complete items 1, 2, and 3. A item 4 if Restricted Delivery is Print your name and address so that we can return the can Attach this card to the back or on the front if space permi 1. Article Addressed to: Nian Fa Lin 52 Lent St. Poughkeepsie, NY	s desired. on the reverse d to you. of the mailpiece.	A. Signature X B. Received by Printed Name) D. Is delivery address different from the lif YES, enter delivery address by the life of th	Agent Addressee C. Depe of Pelivery Yes No
	100 v <u>ertigent</u>	3. Service Type ☑ Certified Mail ☐ Express Ma	
Article Number (Transfer from service labe	7004 2890	0 0002 4005 7783	
PS Form 3811, February 2004	Domestic Reti	urn Receipt	102595-02-M-1540